

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

(1) ARTHUR L. MOSLEY *2017000634*
(Name of Plaintiff) (Inmate Number) :

4750 MANOR DR STRAWBERRY PA 18360 :
(Address) :

(2) _____
(Name of Plaintiff) (Inmate Number) :

(Address) :

(Each named party must be numbered,
and all names must be printed or typed) :

vs. :

CIVIL COMPLAINT

(1) GARY HANDLE (warden) :
(2) TRINITY FOOD GROUP :
(3) MR LAWTON (supervisor Director) :
(Names of Defendants) :

(Each named party must be numbered,
and all names must be printed or typed) :

FILED
SCRANTON

FEB 06 2018

PER *[Signature]* DEPUTY CLERK

TO BE FILED UNDER: 42 U.S.C. § 1983 - STATE OFFICIALS

28 U.S.C. § 1331 - FEDERAL OFFICIALS

I. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? Yes No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? Yes No
- C. If your answer to "B" is Yes:

1. What steps did you take? STARTED ADMINISTRATIVE REMEDY

PROCESS, FILED INMATE GRIEVANCE AND APPEALED TO FINAL STEP

2. What was the result? NO ACTION WAS TAKEN TO REMEDY

COMPLAINT CONDITIONS STILL EXIST PLEASE SEE ATTACHED

- D. If your answer to "B" is No, explain why not: _____

III. DEFENDANTS

- (1) Name of first defendant: GARY HAIDLE

Employed as Warden at MONROE COUNTY CORRECTIONAL FACILITY
 Mailing address: 4250 Main Dr STRoudsburG PA 18360

- (2) Name of second defendant: TRINITY FOOD Group
 Employed as Food Service provider at 4250 Main Dr STRoudsburG PA
 Mailing address: 11-94-F STRoudsburG PA 18360

- (3) Name of third defendant: MR LAWTON
 Employed as Food Service Director at M.C.C.F
 Mailing address: 4250 Main Dr STRoudsburG PA 18360

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. ON July 3, 2017 THE PLAINTIFF BECAME AN INMATE
AT THE MONROE COUNTY CORRECTIONAL FACILITY HERE IN
STRoudsburG PA, SENTENCED TO 9 TO 24 MONTHS.

2. THE PLAINTIFF IS OF JEWISH FAITH AND EAT ONLY KOSHER MEALS. SINCE THE PLAINTIFF INCARCERATION STARTED THE PLAINTIFF HAS BEEN SERVE THE EXACT SAME MEALS EVERY DAY. DONUT BUTTER + JELLY BREAKFAST & LUNCHEON/RAW VEG AND COTTAGE CHEESE EVERYDAY FOR DINNER W/RAW VEG.

3. IN OVER 7 MONTHS THE PLAINTIFF HAS NOT HAD A HOT OR COOKED MEAL JUST SOLID UNCOOKED FOOD!

V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

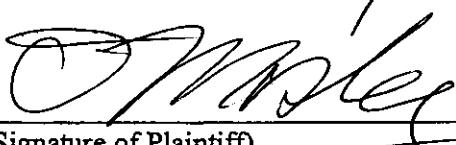
1. AN INJUNCTION ORDERING THE FACILITY TO SERVE ATLEAST ONE HOT COOKED MEAL A DAY FOR THE KOSHER MEAL.

2. GRANT THE PLAINTIFF MONEY DAMAGES NOMINAL DAMAGES IN THE AMOUNT \$1,00

3. COMPENSATORY DAMAGES IN THE AMOUNT \$50,000.00
PUNITIVE DAMAGES IN THE AMOUNT \$50,000.00

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 1st day of FEBRUARY, 2018.


D. Miller
(Signature of Plaintiff)

Monroe County Correctional Facility

Inmate Grievance Form

Inmate's Name: Arthur Mosley OCA # 2017-0000634Date Grievance requested 7-6-17 Date Grievance given to inmate 7-13-17Grievance Tracking Number 2017-6-0058

Completed grievance received by Grievance Coordinator on _____

Inmate Filing Grievance:

Complete Parts I and II of this form using clear, specific and brief statements. Attach any request slips which will verify your attempt to resolve this issue with correctional staff and/or supervisors.

Part I: State your grievance clearly. If you need more space attach a separate sheet of paper.

I AM ON A KOSHER DIET FOR RELIGIOUS REASOSN SINCE 7-1-17 I HAVE BEEN GIVEN POTATO BREAD EVERYDAY FOR LUNCH AND COTTAGE CHEESE EVERYDAY FOR DINNER THIS DIET IS very HIGH IN PROTEIN WHICH IS NOT GOOD TO MEAT PROTEIN CAN CAUSE MEDICAL ISSUES ALSO NONE OF THE HOT OR COLD FOODS ARE REASONABLE. I HAVE BEEN SENTENCED TO COLD FOOD SINCE IT CAN BE UNFAIR AND EVEN CRUEL. I HAVE TO UNDERSTAND THIS IS WHAT MY MENTAL

Part II: Action or relief requested. WHAT I AM DOING IS TO UNDERSTAND THIS IS WHAT MY MENTAL
I REQUEST THAT THE KOSHER MENU BE LOOKED INTO I DONT EXPECT
ANYTHING SPECIAL JUST REASONABLE. A VARIETY JUST
LIKE THE REGULAR MEALS AND A HOT TRAY AT TIMES

Certification: I submit this grievance in good faith, having exhausted all other remedies and without the intent to harass. I affirm that all statements I have given are true and correct. I understand that I have guarantee against reprisal but also understand that I may face disciplinary action if I have filed this grievance under false pretenses or intentionally made false statements.


Inmate's Signature

ARTHUR MOSLEY
Inmate Print Name

Grievance Response - Step 1

Answered by Mr. Lawton LSP Date: 7/20/17
 The kosher diet is set by the Dietician so I am not allowed to change it, but will try and get a better selection of vegetables and find a different kosher protein. For a change in the dinner trays to switch out cottage cheese once in a while.

I respect the above response in part, but the issue of hot meals has not been addressed. There are kosher meals that are heated that are not in communal dining areas. That don't require looking.

I, inmate ARTHUR MOSLEY do not agree with the response in Step 1 and would like this grievance to be sent to the final grievance step.

I understand the Final Step, answered by the Warden/designee is the final step in the grievance process and shall be considered final.


Inmate Signature

ARTHUR MOSLEY
Print name and date

Grievance Response - Final Step

Answered by Warden Warden Lawton Date: 7/24/17
 This is the kosher diet approved by the Dietician.
 I will look into other options as possible.



**FORMS TO BE COMPLETED BY PRISONERS FILING A CIVIL RIGHTS
COMPLAINT UNDER 42 U.S.C. § 1983 or 28 U.S.C. § 1331**

COVER SHEET

THIS COVER SHEET CONTAINS IMPORTANT INFORMATION ABOUT FILING A COMPLAINT AND YOUR OBLIGATIONS IF YOU DO FILE A COMPLAINT. READ AND COMPLETE THE COVER SHEET BEFORE YOU PROCEED FURTHER.

The cost for filing a civil rights complaint is \$350.00.

If you do not have sufficient funds to pay the full filing fee of \$350.00 you need permission to proceed in forma pauperis. However, the court will assess and, when funds exist, immediately collect an initial partial filing fee of 20 percent of the greater of:

- 1) the average monthly deposits to your prison account for the past six months; or
- 2) the average monthly balance in your prison account for the past six months.

Thereafter, the institution in which you are incarcerated will be required to make monthly payments of 20% of the preceding month's deposits credited to your account until the entire filing fee is paid.

CAUTION: YOUR OBLIGATION TO PAY THE FULL FILING FEE WILL CONTINUE REGARDLESS OF THE OUTCOME OF YOUR CASE, EVEN IF YOUR COMPLAINT IS DISMISSED BEFORE THE DEFENDANTS ARE SERVED.

1. You shall file a complaint by completing and signing the attached complaint form and mailing it to the Clerk of Court along with the full filing fee of \$350.00. (In the event attachments are needed to complete the allegations in the complaint, no more than three (3) pages of attachments will be allowed.) If you submit the full filing fee along with the complaint, you DO NOT have to complete the rest of the forms in this packet. **Check here if you are submitting the filing fee with the complaint form.** _____

2. If you cannot afford to pay the fee, you may file a complaint under 28 U.S.C. § 1915 without paying the full filing fee at this time by completing the following: (1) Complaint Form; (2) Application To Proceed In Forma Pauperis; and (3) Authorization Form. **You must properly complete, sign and submit all three standard forms or your complaint may be returned to you by the Clerk of Court. Check here if you are filing your complaint under 28 U.S.C. § 1915 without full prepayment of fees.** _____

Please Note: If your case is allowed to proceed and you are awarded compensatory damages against a correctional facility or an official or agent of a correctional facility, the damage award will first be used to satisfy any outstanding restitution orders pending. Before payment of any compensatory damages, reasonable attempts will be made to notify the victims of the crime for which you were convicted concerning payment of such damages. The restitution orders must be fully paid before any part of the award goes to you.

DO NOT DETACH THE COVER SHEET FROM THE REST OF THE FORMS



ARTHUR L. MOSLEY # 001700000634
MONROE COUNTY CORRECTIONAL FACILITY
4950 MANOR DR STRoudsburY PA 18360

RECEIVED
SCRANTON

FEB 06 2018

PER A. M. O.
DEPUTY CLERK

OFFICE OF THE CLERK
UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF PENNSYLVANIA
235 North Washington Ave
P.O. Box 1448
SCRANTON, PA 18501-1448

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